# ARIZONA CORPORATION COMMISSION UTILITIES DIVISION

ANNUAL REPORT MAILING LABEL - MAKE CHANGES AS NECESSARY

W-02267A Donald Steven McAdams dba McAdams Water Company 10434 230<sup>th</sup> St. Delta, IA 52550

RECEIVED

JAN 27 2011

AZ CORP COMM Director Utilities

# ANNUAL REPORT Water

FOR YEAR ENDING

12 | 31 | 2010

FOR COMMISSION USE

ANN 04 10

11-12-1

# **COMPANY INFORMATION**

Company Name (Business Name) 57		s Water	Co
Mailing Address 10434 2	30 EST		
De Ha (City)	Towa	525	550
(City)	(State)	(Zi	p)
641-670-1029			
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Includ	de Area Code)
Email Address			
Local Office Mailing Address			
(Street)			
(City)	(State)	(Zi	p)
Local Office Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Includ	de Area Code)
Email Address			
			<u>.</u>
	MENT INFORMATION		
□ Regulatory Contact:	mcAdan	Own (Title  Towa (State)	V.0.1C
Management Contact:	(Name)	(Titl	(e)
□ Management Contact: 57eve  10434 230 = \$4  (Street)	DeHa	Iowa	52550
(Street)	(City)	(State)	(Zip)
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Include	e Area Code)
Email Address		· · · · · · · · · · · · · · · · · · ·	
On Site Manager:			
On Site Manager:	(Name)		
(Street)	(City)	(State)	(Zip)
Telephone No. (Include Area Code) Email Address	Fax No. (Include Area Code)	Cell No. (Includ	e Area Code)

Statutory Agent:			
• •	(Name)		
(Street)	(City)	(State) (Zip)	
Telephone No. (Include Area Code)	Fax No. (Include Area Code	Cell No. (Include Area Code)	
Attorney:	(Name)		
	, ,		
(Street)	(City)	(State) (Zip)	
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Include Area Code)	
Email Address			
<u>o</u>	WNERSHIP INFORMATI	<u>ON</u>	
Check the following box that applies to	o your company:		
Sole Proprietor (S)	C Corporation (C) (Other than Association/Co-op)		
Partnership (P)	☐ Subchapter S Corporation (Z)		
☐ Bankruptcy (B)	Association/Co-op (A)		
Receivership (R)	Limited Liabili	ty Company	
Other (Describe)			
	COUNTIES SERVED		
Check the box below for the county/ie	s in which you are certificated to	provide service:	
□ арасне	☐ COCHISE		
GILA	□ GRAHAM	GREENLEE	
	MARICOPA	☐ MOHAVE	
☐ NAVAJO	☐ PIMA	☐ PINAL	
☐ SANTA CRUZ	☐ YAVAPAI	☐ YUMA	
☐ STATEWIDE			

# UTILITY PLANT IN SERVICE

Acct.		Original	Accumulated	O.C.L.D.
No.	DESCRIPTION	Cost (OC)	Depreciation (AD)	(OC less AD)
301	Organization			
302	Franchises			
303	Land and Land Rights			
304	Structures and Improvements			
307	Wells and Springs			
311	Pumping Equipment			
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes			
331	Transmission and Distribution Mains			
333	Services			
334	Meters and Meter Installations			
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS	f)	0	()

This amount goes on the Balance Sheet Acct. No. 108-

# CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR

Acct. No.	DESCRIPTION	Original Cost (1)	Depreciation Percentage (2)	Depreciation Expense (1x2)
301	Organization			
302	Franchises			
303	Land and Land Rights			
304	Structures and Improvements			
307	Wells and Springs			
311	Pumping Equipment			
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes			
331	Transmission and Distribution Mains			
333	Services			
334	Meters and Meter Installations			
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS	0	0	0

This amount goes on the Comparative Statement of Income and Expense \_\_\_\_\_\_ Acct. No. 403.

### **BALANCE SHEET**

Acct No.		BALANCE AT BEGINNING OF	BALANCE AT END OF
110.	ASSETS	YEAR	YEAR
	CURRENT AND ACCRUED ASSETS		
131	Cash	\$	\$
134	Working Funds		
135	Temporary Cash Investments		
141	Customer Accounts Receivable		
146	Notes/Receivables from Associated Companies		
151	Plant Material and Supplies		
162	Prepayments		
174	Miscellaneous Current and Accrued Assets		
	TOTAL CURRENT AND ACCRUED ASSETS		
		\$	\$
	FIXED ASSETS		
101	Utility Plant in Service	\$	\$
103	Property Held for Future Use		
105	Construction Work in Progress		
108	Accumulated Depreciation – Utility Plant		
121	Non-Utility Property		
122	Accumulated Depreciation – Non Utility		
	TOTAL FIXED ASSETS	\$	\$
	TOTAL ASSETS	\$	\$

NOTE: The Assets on this page should be equal to Total Liabilities and Capital on the following page.

# COMPANY NAME Steve McAdams Water Co.

# **BALANCE SHEET (CONTINUED)**

Acct. No.		BALANCE AT BEGINNING OF	BALANCE AT END OF
110.	LIABILITIES	YEAR	YEAR
	CURRENT LIABILITES		
231	Accounts Payable	\$	\$
232	Notes Payable (Current Portion)	Ψ	Ψ
234	Notes/Accounts Payable to Associated Companies		<u> </u>
235	Customer Deposits		
236	Accrued Taxes		
237	Accrued Interest		
241	Miscellaneous Current and Accrued Liabilities		
211	TOTAL CURRENT LIABILITIES	\$	\$
	LONG-TERM DEBT (Over 12 Months)		
224	Long-Term Notes and Bonds	\$	\$
251	DEFERRED CREDITS		
251	Unamortized Premium on Debt	\$	\$
252	Advances in Aid of Construction		
255	Accumulated Deferred Investment Tax Credits		
271	Contributions in Aid of Construction		
272	Less: Amortization of Contributions		
281	Accumulated Deferred Income Tax		
	TOTAL DEFERRED CREDITS	\$	\$
	TOTAL LIABILITIES	\$	\$
	CAPITAL ACCOUNTS		
201	Common Stock Issued	\$	\$
211	Paid in Capital in Excess of Par Value		
215	Retained Earnings		
218	Proprietary Capital (Sole Props and Partnerships)		
	TOTAL CAPITAL	\$	\$
	TOTAL LIABILITIES AND CAPITAL	s 1)	s 0

### COMPARATIVE STATEMENT OF INCOME AND EXPENSE

Acct.	OPERATING REVENUES	PRIOR YEAR	CURRENT YEAR
No.		2009	2010
461	Metered Water Revenue	\$ 2413.	\$ 2782.
460	Unmetered Water Revenue		
474	Other Water Revenues		
	TOTAL REVENUES	\$ 2413.	\$ 2782.
	OPERATING EXPENSES		
601	Salaries and Wages	\$ 400.	\$ 410.
610	Purchased Water		
615	Purchased Power	935.89	834.
618	Chemicals	1	
620	Repairs and Maintenance	3/5	4629.
621	Office Supplies and Expense		
630	Outside Services		
635	Water Testing		
641	Rents		
650	Transportation Expenses		
657	Insurance – General Liability	457.	457.
659	Insurance - Health and Life		
666	Regulatory Commission Expense – Rate Case		
675	Miscellaneous Expense	66	250.
403	Depreciation Expense		
408	Taxes Other Than Income	187.67	175,25+ 7,48
408.11	Property Taxes	1205,32	1149.
409	Income Tax		
	TOTAL OPERATING EXPENSES	\$ 3566.88	\$ 7901.73
	OPERATING INCOME/(LOSS)	\$ (1153,88)	\$ (5119.73)
	OTHER INCOME/(EXPENSE)		
419	Interest and Dividend Income	\$	\$
421	Non-Utility Income		
426	Miscellaneous Non-Utility Expenses		
427	Interest Expense		
	TOTAL OTHER INCOME/(EXPENSE)	\$	\$
	NET INCOME/(LOSS)	\$ (1153.88)	\$ (5119.73)

### SUPPLEMENTAL FINANCIAL DATA Long-Term Debt

	LOAN #1	LOAN #2	LOAN #3	LOAN #4
Date Issued	NON	e		
Source of Loan	,			
ACC Decision No.				
Reason for Loan				
Dollar Amount Issued	\$	\$	\$	\$
Amount Outstanding	\$	\$	\$	\$
Date of Maturity				
Interest Rate	%	%	%	%
Current Year Interest	\$	\$	\$	\$
Current Year Principle	\$	\$	\$	\$

Meter Deposit Balance at Test Year End	\$ ()	
Meter Deposits Refunded During the Test Year	\$ 0	

COMPANY NAME	Steve McAdams	Water Go.
Name of System:	ADEQ Public	Water System Number:

# WATER COMPANY PLANT DESCRIPTION

#### **WELLS**

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled
803-745L	1/2-1/2	75	401	8"	1/2	

Arizona Department of Water Resources Identification Number

#### **OTHER WATER SOURCES**

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)
Naue		
/V 0N -		

BOOSTER PUMP	BOOSTER PUMPS		FIRE HYDRANTS	
Horsepower	Quantity	Quantity Standard	Quantity Other	
Naller		None		
// 0 // 0		// 0 ! 4		
			•	

STORAGE TAN	STORAGE TANKS		PRESSURE TANKS	
Capacity	Quantity	Capacity	Quantity	
		5000		
NoNe				
//				

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME	Steve	McAdams	Water Co.	
Name of System:		ADEQ Public	Water System Number:	

### WATER COMPANY PLANT DESCRIPTION (CONTINUED)

-		*		-
M	Λ	- 61	N	•
	$\rightarrow$			

Size (in inches)	Material	Length (in feet)
2	PIC	2820'
3		
4	PVC	3680'
5		
6		
8		
10		
12		

#### **CUSTOMER METERS**

Size (in inches)	Quantity
5/8 X <sup>3</sup> / <sub>4</sub>	
3/4	7
1	
1 1/2	
2	
Comp. 3	
Turbo 3	
Comp. 4	
Turbo 4	
Comp. 6	
Turbo 6	

	, , , ,				
	None				
FRUCTURES:					
	Nove				
THER:					
		· · · · · · · · · · · · · · · · · · ·	·	··· -	

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME:	Steve	McAdams	Water Co.	
Name of System:			c Water System Number:	

# WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2010

MONTH	NUMBER OF CUSTOMERS	GALLONS SOLD (Thousands)	GALLONS PUMPED (Thousands)	GALLONS PURCHASED (Thousands)
JANUARY		(2200	(1330 1302 130)	(22000020)
FEBRUARY				
MARCH				
APRIL				
MAY				
JUNE				
JULY				
AUGUST				
SEPTEMBER				
OCTOBER				
NOVEMBER				
DECEMBER	1			
	TOTALS →	659.0775	•	0

What is the level of arsenic for each well on your system?mg/l (If more than one well, please list each separately.)
If system has fire hydrants, what is the fire flow requirement? New GPM forhrs
If system has chlorination treatment, does this treatment system chlorinate continuously?  ( ) Yes
Is the Water Utility located in an ADWR Active Management Area (AMA)?  ( ) Yes ( ) No
Does the Company have an ADWR Gallons Per Capita Per Day (GPCPD) requirement?  ( ) Yes (X) No
If yes, provide the GPCPD amount:

Note: If you are filing for more than one system, please provide separate data sheets for each system.

COMPANY NAME:	Steve	mcAdams	Water	Coe
Name of System:		ADEQ Public	c Water Systen	n Number:

# **UTILITY SHUTOFFS / DISCONNECTS**

MONTH	Termination without Notice R14-2-410.B	Termination with Notice R14-2-410.C	OTHER
JANUARY	K14-2-410.D	K14-2-410.C	
FEBRUARY	Marie		
MARCH	NONC		
APRIL			
MAY			
JUNE			
JULY			
AUGUST			
SEPTEMBER			
OCTOBER			
NOVEMBER			
DECEMBER			
TOTALS>			

OTHER (description):						
	- 1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1				,	
		<u> </u>				

### **PROPERTY TAXES**

Amount of actual property taxes paid during Calendar Year 2010 was: \$\frac{31.64}{7017.3} \frac{3}{2}
Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks fo property tax payments) of any and all property taxes paid during the calendar year.
If no property taxes paid, explain why

# VERIFICATION AND SWORN STATEMENT Taxes

RECEIVE

JAN 27 2011

AZ GORP COMM Director Utilities

**VERIFICATION** 

STATE OF Arizona
I, THE UNDERSIGNED
OF THE

COUNTY OF (COUNTY NAME) Maricopa	•
Steve made and	Owner
Steve Mc Adams	Water Co.

DO SAY THAT THIS ANNUAL UTILITY PROPERTY TAX AND SALES TAX REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2010

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

#### **SWORN STATEMENT**

I HEREBY ATTEST THAT ALL PROPERTY TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

I HEREBY ATTEST THAT ALL SALES TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

SIGNATURE OF OWNER OR OFFICIAL

641-670-1029

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

22

MY COMMISSION EXPIRES

DAY OF

MONTH Tanuary .20//

(SEAL)

9-13-11

SIGNATURE OF NOTARY PURILC

DIXIE LEE SHIPLEY
Commission Number 157708
My Commission Expires

#### **INCOME TAXES**

	•	
For this reporting period, provide the following:		
Federal Taxable Income Reported Estimated or Actual Federal Tax Liability	0	
State Taxable Income Reported Estimated or Actual State Tax Liability		
Amount of Grossed-Up Contributions/Advances:		
Amount of Contributions/Advances Amount of Gross-Up Tax Collected Total Grossed-Up Contributions/Advances		
Decision No. 55774 states, in part, that the utility of the tax year when tax returns are completed. any Payer or if any gross-up tax refunds have all name and amount of contribution/advance, the areach Payer, and the date the Utility expects to make	Pursuant to this Decision, if gross- ready been made, attach the follow mount of gross-up tax collected, the	up tax refunds are due to ing information by Payer amount of refund due to
CERTIFICATION		
The undersigned hereby certifies that the Utility hereby prior year's annual report. This certification is to corporation; the managing general partner, if a company or the sole proprietor, if a sole proprietor	o be signed by the President or Ch a partnership; the managing mem	ief Executive Officer, if a
tuel	1-22-11	
SIGNATURE	DATE	
Steve M'Adams	Dwner	
PRINTED NAME	TITLE	

# RECEIVED

# VERIFICATION AND SWORN STATEMENT Intrastate Revenues Only

JAN 27 2011

AZ CORP COMM Director Utilities

VERIFICATION

STATE OF Hr/2012

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME)

MAY: COPE

NAME (OWNER OR OFFICIAL) TITLE

Steve Mc Adams

Q

teve mi Adams Water Co.

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH DAY YEAR
12 31 2010

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

#### **SWORN STATEMENT**

IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM <u>ARIZONA INTRASTATE</u> UTILITY OPERATIONS DURING CALENDAR YEAR 2010 WAS:

Arizona Intrastate Gross Operating Revenues Only (\$)

s 2966.82

(THE AMOUNT IN BOX ABOVE INCLUDES \$ 175, 25 + 7, 48 Use Featin Sales taxes billed, or collected)

\*\*REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL)

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

22

DAY OF

COUNTY NAME KEOKUK

MONTH Tonuary

20//

(SDIXIE LEE SHIPLEY
Commission Number 157708
My Commission Expires
MY COMMISSION EXPIRES 7-13-1

SIGNATURE OF NOTARY PUBLIC

SIGNATURE OF OWNER OR OFFICIAL

TELEPHONE NUMBER

#### **VERIFICATION** AND SWORN STATEMENT RESIDENTIAL REVENUE

**Intrastate Revenues Only** 

JAN 27 2011

RECEIVED

AZ CORP COMM Director Utilities

**VERIFICATION** 

STATE (	OF A	ARIZ	ONA
---------	------	------	-----

I, THE UNDERSIGNED

Maricopa NAME (OWNER OR OFFICIAL) COMPANY NAME

COUNTY OF (COUNTY NAME)

OF THE

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH DAY YEAR 12 31 2010

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

#### SWORN STATEMENT

IN ACCORDANCE WITH THE REOUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2010 WAS:

ARIZONA INTRASTATE GROSS OPERATING REVENUES

\$ 2966,82

THE AMOUNT IN BOX AT LEFT INCLUDES \$ 175,25#7,48 Use fee IN SALES TAXES BILLED, OR COLLECTED)

\*RESIDENTIAL REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED.

641-670- 1029 TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

DAY OF

NOTARY PUBLIC NAME Lee Shipley 20 1

(SEAL)

DIXIE LEE SHIPLEY Commission Number 157708 My Comпission Expires



#### 2009 SECOND HALF PAYMENT STUB DUE MARCH 1, 2010 DELINQUENT AFTER MAY 3, 2010

ICADAMS DONALD STEPHEN

AKE CHANGES TO MAILING ADDRESS BELOW R GO TO http://treasurer.maricopa.gov



MAKE CHECK PAYABLE TO:

Maricopa County Treasurer P O Box 52133 Phoenix, AZ 85072-2133

PARCEL/	ACCOUNT#	202-06-02	7G 2
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		

PRINT THE ABOVE PARCEL I ACCOUNT NUMBER ON YOUR CHECK

U.S. FUNDS ONLY

SECOND HALF	\$	543.50
SECOND HALL	<b>*</b>	515.50

Please remember that your second half payment is due in March and that no additional notification is sent.

		723
STEVE OR DONNA McADAMS  10434 230TH ST  DELTA, IA 52550	1571 72-389/739	
Pay to the Marcaga Co Just \$57  Tire hundred faty there + 5/10 - Dollars	~,	
EOUNTY BANK Signares, Williamstoria For 262-06-02762 1:0739038911: 04 5644 211 1571	Rate	
Pagiar (Carlo	GUAPPIAL SAFE AT BLUE	벌

2009 SECOND HALF PAYMENT STUB DUE MARCH 1, 2010 DELINQUENT AFTER MAY 3, 2010

MCADAMS WATER CO

MAKE CHANGES TO MAILING ADDRESS BELOW OR GO TO http://treasurer.maricopa.gov

DETACH AND RETURN WITH PAYMENT



MAKE CHECK PAYABLE TO:

Maricopa County Treasurer P O Box 52133 Phoenix, AZ 85072-2133 PARCEL/ACCOUNT# 635-49-707 0

PRINT THE ABOVE PARCEL / ACCOUNT NUMBER ON YOUR CHECK

U.S. FUNDS ONLY

	SECOND HALF	\$	58.	66
п		š		

Please remember that your second half payment is due in March and that no additional notification is sent.

STEVE OR DONNA McADAMS 10434 230TH ST DELTA, IA 52550	1570 72-389/739	, 700007
Pay to the Marcipa G. June 15/2010  Pay to the Marcipa G. June 1858  Fifty eight & Glin Dollars	66	
EOUNTY		
BANK Signary Williamsbury For WG/NK-635-49-707-0 Somme McAdams 1:0739038911: 04 5644 211 1570	MP	
Island Clark		



#### TEANSACTION PRIVILEGE, USE AND SEVERANGE FAXERERURNY (FOREIEN

Auzona Department of Revenue BO BOX 29010 PHOENIX, AZ 85036-9010

NOTE TELS RESIDEN CAN BE ELLED AND PAID ELECTTONICALEY ON WWW AZTAXES GOV-THE INFORMATION IS SECURE AND YOU WILL ECEIVE INSTANT CONFIEMATION

W	100	955	683	23.00	220	19102	Charles.	12/10	31.00		ED:US	22.13	94.23	9-00	620
S	673	: 3	18	22 Y	. 4.	4-1	- 19	3 . 3	- 11	20.00	2.1	of ,	170	100	3.23
3.5	7.7	a 7.	A 10	52 0	, E. S	2	小部	33	5.10		111	150	E 8	3. 4	26 61

**M**EAGAMETWATEGUCOMEAN

DE\_TAPA 7/2500-8545

Zanjanice. Stanon

One Time | Final Helum Only Helum : (CANCEL DENS

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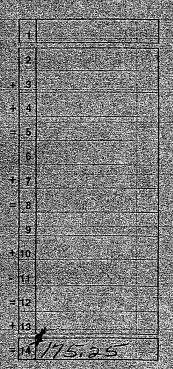
regularistas (13 Aricantalus)

Santress Changed

		вазе анаси солинывой рацез,		10.00
MA GRANDS CO.  ZO PRIBURGO PERIONINAS  PERIONINAS CONTRACTOR CONTR	(Z) (E) CONTROL OF ALICENT CONTROL OF ALICENT	(F) (G) METAXABLE AMOUNT TAXFATE	TOTAL TAX ACCOUNT	(J)=(FxI) TING ACCOUNTING ATE CHECKT
HASTE CHANGE MAR 504		0.07300	, 50006	60
通用ILTHIES。 MAD :004 )		3781 70 0 06800 b	175 25 20005	60
SPATE CHANGE MAR 014		。 [2] [1] [0.07300]		60
AREQIAL PERG MAR 1614		0.06300	. 0005	60
SRATE CHANGE (MAR) - 017		0.07300	23- 20006	80
gonsecrat.				227

#### iisaa aa dagaa ka dag

- a Aferaka bilan kang Sanadala As
  - (2. Fotalistax Ancieuni (Irone column: H)
  - 3:State excess tax collected
  - L villiter expess tax collected.
  - **Sugar, faxet** pourcy: Admines 2, 3 and 4
    - Recounting Credit (from column 4)
    - Z. State excess ax accommon credit: Multiply-line 3 by €2
    - 8 Total Accounting Credit Add intes 6 and 7
  - **9 Najiakého me "Subtraci liné 3 trom line :**
  - ke Balanda analing pasa
  - If CET estimated payments to be used.
  - 122 Craftamount due this period
  - Additional payment to be applied (for other periods)
  - in termetamber termeter beginne til sæterlikki



AMENDED RETURN ONLY ORIGINAL REMITTED AMOUNT

DORUSE

i penalties of Senury: I decisio that I have examined this return, including accompanying schedules and statements, and to the best of my ledge and belief, it is the correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has

PAID PREPARER'S SIGNATURE (OTHER THAN TAXPAYER)

TPT-1 return is due the 20<sup>th</sup> day of the month following

07334643-N

1 2 3 1 2 0 1 0

X LABELED RETURN

the reporting period. STATE LICENSE NUMBER:

□en □sen

0.1.0.1.2.0

DERUSEONIA

POSTMARK DATE

RECEIVED DATE

TAXPAYER IDENTIFICATION NUMBER:

PERIOD BEGINNING: PERIOD ENDING:

PAID PREPARENS EIN OR SSN

lease make check pavable to Arizona Decarlment of Revenue

TRANSACTION DETAIL (ADDITIONAL THA	NSACTIONS)  DEDICTION	IF).	(0)	JH) TOTALTAX	ACCOUNTING ACC
### RETAIL MAR 0.47	SAMOUNI AMOUNI	AMOUNT	0.06300	AMOUNT	.000560
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